



(37 CFR	1.9(f) & 1.27(d))NONPROF	IT ORGANIZATION	
			Docket No
Applica	int, Patentee, or Identifier: ition No.:	Ivo Glynne GUT et al. 09/555,971	
	ition Filed:	DOT/EDO0/07000	
	ional Application No.:		
	ional Filing Date: Method for Identifying Nucl	December 4, 1998 eic Acids by Electro-Spray Mass Specto	motny
11110.	Monitor for facilitying rack	ole Acids by Electro-spray Mass specio	Пепу
		red to act on behalf of the nonprofit organizatio	
	NONPROFIT ORGANIZATION: OF NONPROFIT ORGANIZATION:	Max-Planck-Gesellschaft zur Förderung der W Berlin, Germany	issenschaften e.V.
TYPE OF N	IONPROFIT ORGANIZATION:		
	NONPROFIT SCIENTIFIC OR EDUCAT (NAME OF STATE	ENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c) FIONAL UNDER STATUTE OF STATE OF THE UNITED S	TATES OF AMERICA C. 501(a) and 501(c)(3))
I hereby s 1.9(e) for described	purposes of paying reduced fees	on Identified above qualifies as a nonprofit orga s to the United States Patent and Trademark O	nization as defined in 37 CFR ffice regarding the invention
<u>⊠</u> †	he specification filed herewith wit he application identified above. he patent identified above.	h title as listed above.	
regarding individual, entities ar independ	the above Identified Invention. concern, or organization having at that no rights to the invention cent inventor under 37CFR 1.9(c) if	r law have been conveyed to and remain wit If the rights held by the nonprofit organizati- rights in the invention must file separate stateme- tre held by any person, other than the inventor, that person made the invention, or by any cond 9(d) or a nonprofit organization under 37 CFR 1.9	on are not exclusive, each ents as to their status as small who would not qualify as an cern which would not qualify
Each pers	on, concern, or organization havir	ng any rights In the invention is listed below:	
	no such person, concern, or organ each such person, concern, or org		
Epigenom Kastanien 10435 Berl			
(small bus	iness concern)		
entitlemer	nt to small entity status prior to nce fee due after the date on wh	ollcation or patent, notification of any change paying, or at the time of paying, the earlie ich status as a small entity is no longer appropria	est of the Issue fee or any
NAME OF	PERSON SIGNINGChrista	a Herzog	MANUAL PROPERTY OF THE PROPERT
	RGANIZATION OF PERSON SIGNING	· · · · · · · · · · · · · · · · · · ·	
ADDRESS (OF PERSON SIGNING: Hofgar	tenstr. 8, 80539 München	

SIGNATURE Whyta Horror
Christa Herzog

DATE 5.10.2000

B3366US

Attorney Docket No. 147-201P BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	METHOD FOR IDENTIFYING NUCLEIC ACIDS BY ELECTRO-SPRAY MASS SPECTROMETRY						
Fill in Appropriate Information -			ereto. If not attached he				
For Use Without	United States A	pplication Number	er 09/555 971		· · · · · · · · · · · · · · · · · · ·		as
Specification	the specification was filed on June 5, 2000 United States Application Number 09/555,971 and amended on the specification was filed on December 4, 1998				(if applicable)	and/or	
Attached:	the specification	n was filed on Dec	ember 4, 1998			(n applicable)	as PCT
	International A	pplication Numbe	er <u>PCT/EP98/07909</u>			; ;	and was
•	amended unde	r PCT Article 19 oı	n			(if app	olicable)
	I hereby state t	hat I have reviewe	ed and understand the c	ontents of the al	ove-identified specific	ration, including t	he claims as
	amended by any am	enament referrea	to above. ose information which			_	
	I do not know a thereof, or patented year prior to this ap prior to this applical date of this applical representative or as: patent or inventor's	or described in an plication, that the ion, that the invention in any counsigns more than the certificate on this certificate on this	the same was ever knowny printed publication is same was not in publication has not been pater try foreign to the Unit welve months (six mont invention has been filed thatives or assigns, except the first under Title 35, Und have also identified be a same which weight the same was a sa	use or on sale : ted or made the ed States of Ar hs for designs)	efore my or our inventing the United States of a subject of an inventor merica on an application for its this application for its the United States.	tion thereof or me America more the certificate issue ion filed by me no, and that no appropriate of American of A	ore than one han one year ed before the or my legal oplication for
च्यु <u>व</u>	a iming date before to	iai oi uie applicau	on on which priority is o	laimed:	application for patent		
Insert Priority	Prior Foreign App	lication(s)				Priority C	laimed
Information:	97121470.5	European l	Patent	December	5. 1997	\boxtimes	
if appropriate)	(Number)	(Country)			y/Year Filed)	Yes	No No
-1.	97121983.7	Europoon	Patant	D	10 1007	5	
	(Number)	(Country)	Patent	December (Month/Day	12, 1997 y/Year Filed)	⊠ V	
: 	((Country)		(Mondy Da	y/ rear riled)	Yes	No
	(Number)	(Country)		(Month/Day	y/Year Filed)	☐ Yes	□ No
	(Number)	(Country)		(Month/Da	y/Year Filed)	□ Yes	□ No
	I hereby claim the be	nefit under Title 3	5, United States Code, §1	_	•		
Insert Provisional							
Application(s): (if any)	(Application Numbe	r)		(Filing D	Pate)	, , , , , , , , , , , , , , , , , , , ,	
	(Application Numbe	r)		(Filing D	Pate)		
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
	Country		Application Number		Date of Filing (Mont	n/Day/Year)	
Insert Requested Information: (if appropriate)							
	application in the ma information which is	nner provided by material to the pa	5, United States Code, §: of the claims of this a the first paragraph of T tentability as defined in lication and the national	plication is not tle 35, United St Title 37, Code o	t disclosed in the pricates Code, §112, I ack of Federal Regulations	or United States a nowledge the dut \$1.56 which becau	and/or PCT
Insert Prior U.S. Application(s): (if any)	(Application Numbe	r)	(Filing Date)		(Status - patented, pe	nding, abandoned	d)
Page 1 of 2	(Application Number	r)	(Filing Date)	<u>-</u>	(Status - patented, pe	nding, abandoned	1)

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Joseph A. Kolasch (Reg. No. 22,463) Ja Bernard L. Sweeney (Reg. No. 24,448) M Charles Gorenstein (Reg. No. 29,271) G Leonard R. Svensson (Reg. No. 30,330) T Andrew D. Meikle (Reg. No. 32,868) M Joe McKinney Muncy (Reg. No. 32,334) D	Perrell C. Birch (Reg. No. 19,382) Ames M. Slattery (Reg. No. 28,380) Aichael K. Mutter (Reg. No. 29,680) Aichael M. Murphy, Jr. (Reg. No. 28,977) Aicry L. Clark (Reg. No. 32,644) Airc S. Weiner (Reg. No. 32,181) Airc S. Weiner (Reg. No. 34,313) Airc S. Meiner (Reg. No. 34,313) Airc S. Weiner (Reg. No. 35,094)
--	---

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 Customer No. 2292

or

PLEASE NOTE:
YOU MUST
COMPLETE
THE
FOLLOWING:

Full Name of First
or Sole Inventor:
Insert Name of
Inventor
Insert Date This
Document is Signed

Insert Residence Insert Citizenship

Insert Post Office
Address

Full Name of Second
Inventor, if any:
see above

ull Name of Third Inventor, if any:

300

Full Name of Fourth Inventor, if any: see above

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on informatic and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements an the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and the such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		
Ivo Glynne GUT	Two fy-e fut		DATE*
Residence (City, State & Country)	su of -e gus	CITIZENSHI	3. October 2000
Paris, France			
$PL\Lambda$		Swiss/British	· · · · · · · · · · · · · · · · · · ·
POST OFFICE ADDRESS (Complete Street Addr	ess including City, State & Country)		
18 rue du Moulin Vert, 75014 Paris, France			
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Kurt BERLIN			
Residence (City, State & Country)		CITIZENSHII	
Stahnsdorf, Germany		German	
POST OFFICE ADDRESS (Complete Street Addre	ess including City, State & Country)		
Marienkaferweg 4, 14532 Stahnsdorf, Germany	•		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Hans LEHRACH		i	
Residence (City, State & Country)		CITIZENSHIF	
Berlin, Germany DEX		Austrian	
POST OFFICE ADDRESS (Complete Street Addre	ess including City, State & Country)		
Lutzelsteinerweg 50, 14195 Berlin, Germany	- , ,,		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Residence (City, State & Country)		CITIZENSHIP	· · · · · · · · · · · · · · · · · · ·
POST OFFICE ADDRESS (Complete Street Addre	ess including City, State & Country)		
•	g and, remain in Southly,		

Page 2 of 2 (Rev. 04/08/2000)

^{*}DATE OF SIGNATURE

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP

or Customer No. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INTERIORIS CICNIA MANAGE				
Ivo Glynne GUT	INVENTOR'S SIGNATURE		DATE*		
Residence (City, State & Country)			10.7		
Paris, France		CITIZENSHI	· -		
		Swiss/Britisl	h -		
POST OFFICE ADDRESS (Complete Street Addr	ess including City, State & Country				
18 rue du Moulin Vert, 75014 Paris, France					
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	_	DATE*		
Kurt BERLIN	I WILL BU	1	00/10/30		
Residence (City, State & Country)		CITIZENSHI	P		
Stahnsdorf, Germany		German			
POST OFFICE ADDRESS (Complete Street Addr	ess including City, State & Country)	<u> </u>			
Marienkaferweg 4, 14532 Stahnsdorf, Germany	,,				
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DAMPA		
Hans LEHRACH	INVENTORSSIGNATURE		DATE*		
Residence (City, State & Country)		CITIZENSHI			
Berlin, Germany					
<u> </u>	ogo in alla di un Cit. Cit. di C	Austrian			
POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
Lutzelsteinerweg 50, 14195 Berlin, Germany					
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Residence (City, State & Country)		CITIZENSHII	P		
POST OFFICE ADDRESS (Complete Street Addre	ess including City, State & Country)				

Page 2 of 2 (Rev. 04/08/2000)

PLEASE NOTE: YOU MUST COMPLETE

THE FOLLOWING:

Insert Residence Insert Citizenship Insert Post Office

Full Name of Second

Full Name of Third

Full Name of Fourth ull Name or row... Inventor, if any: see above

1

^{*}DATE OF SIGNATURE

I hereby appoins the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart Joseph A. Kolasch Bernard L. Sweeney Charles Gorenstein Leonard R. Svensson Andrew D. Meikle Joe McKinney Muncy John W. Bailey Gary D. Yacura	(Reg. No. 21,066) (Reg. No. 22,463) (Reg. No. 24,448) (Reg. No. 29,271) (Reg. No. 30,330) (Reg. No. 32,868) (Reg. No. 32,334) (Reg. No. 32,881) (Reg. No. 35,416)	Terrell C. Birch James M. Slattery Michael K. Mutter Gerald M. Murphy, Jr. Terry L. Clark Marc S. Weiner Donald J. Daley John A. Castellano	(Reg. No. 19,382) (Reg. No. 28,380) (Reg. No. 29,680) (Reg. No. 28,977) (Reg. No. 32,644) (Reg. No. 32,181) (Reg. No. 34,313) (Reg. No. 35,094)
--	---	---	--

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP

Customer No. 2292 or

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		
Ivo Glynne GUT	HAA THAI OK 2 QUALAT OKT		DATE*
Residence (City, State & Country)		CITIZENSHII	
Paris, France	į	Swiss/British	
POST OFFICE ADDRESS (Complete Street Addr	ress including City State & Country	SWISS/ BITUSII	
18 rue du Moulin Vert, 75014 Paris, France	cos nervania city, oute a country,		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Kurt BERLIN		,	DATE
Residence (City, State & Country)	1	CITIZENSHIP	
Stahnsdorf, Germany	J	German	
POST OFFICE ADDRESS (Complete Street Address	ess including City, State & Country)	German	
Marienkaferweg 4, 14532 Stahnsdorf, Germany	, , , , , , , , , , , , , , , , , , ,		
GIVEN NAME/FAMILY NAME	INVENTORSSIGNATURE	,	DATE*
Hans LEHRACH	1 the labor		1 Nov 2000
Residence (City, State & Country)	1	CITIZENSHIP	
Berlin, Germany		Austrian	
POST OFFICE ADDRESS (Complete Street Addres	ess including City. State & Country)	7,404.4.	
KWXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	errassenstrasse 31, 14		.n, Germany
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
			D.11.~
Residence (City, State & Country)		CITIZENSHIP	
POST OFFICE ADDRESS (Complete Street Address	ss including City, State & Country)		
	. 0 - 7/ 7/		

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING: 1

Full Name of First or Sole Inventor: Inventor Inventor Inventor Inventor Inventor Date This Document is Signed

Insert Residence Insert Post Office Address

I

ÌшЬ

Full Name of Second

Full Name of Third ull Name or Arm_ Inventor, if any: see above

Full Name of Fourth ull Name of . . _ . Inventor, if any: see above

Page 2 of 2 (Rev. 04/08/2000)

*DATE OF SIGNATURE